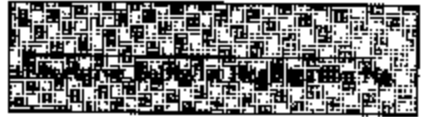


226
Executive Lobbyist Registration No.

FOR OFFICE USE ONLY
Postmark Date: 11/2/00
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2000 11 03 10000
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- Page 1 of 2

**EXECUTIVE LOBBYING
SUPPLEMENTAL REGISTRATION FORM**



- 2) Name N/A
Address _____
Business or purpose _____
☐ New Representation
Does this person pay you? _____
If No, who pays you? _____
☐ Terminated Representation as of _____
- 3) Name N/A
Address _____
Business or purpose _____
☐ New Representation
Does this person pay you? _____
If No, who pays you? _____
☐ Terminated Representation as of _____

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; and that no information required by LSA-R.S. 49:71 et seq. has been deliberately omitted.

Signature of Lobbyist